

ASSISTANT COMMISSIONER FOR PATENTS Washington, DC 20231

PATENT Date: November 20, 2001 File No. 2320.65992

| Sir: | |
|--|---|
| Dit. | I hereby certify that this paper is being deposited w |
| Transmitted herewith for filing is the patent application of | United States Postal Service as Express Mail in an eq addressed to: U.S. Patent and Trademark Office, Po |
| Inventor(s): Joseph P. Perrone and | 2327, Arlington, VA 22202 on this date. |

Nathan P. Taubitz November 20, 2001 For: SYSTEMS AND METHODS FOR

EL 846173698 US Express Mail Label No.:

\$ 740.00

CONTROLLING NETWORK COMMUNICATIONS Date

| Enclose | ed are: | (|
|---------|--|----|
| (X) | 19 pages of specification, including 28_ claims and an abstract. | |
| | an executed oath or declaration, with power of attorney. | |
| (X) | an unexecuted oath or declaration, with power of attorney. | |
| (X) | _4 sheet(s) of informal drawing(s). | |
| () | sheet(s) of formal drawings(s). | |
| (X) | Assignment(s) of the invention to <u>UTT Corporation, Inc., d/b/a Withit.</u> | _ |
| (X) | Assignment Form Cover Sheet. | |
| (X) | A check in the amount of \$\frac{40.00}{} to cover the fee for recording the assignment(| s) |
| | is enclosed. | |
| () | Information Disclosure Statement. | |
| | | |

- Form PTO-1449 and cited references.
- Associate power of attorney. ()

Basic Fee

Priority Document.

Fee Calculation For Claims As Filed

| | b) | Independent Claims | _3 | - | 3 | = | 0_ | x | \$ 84.00 | = | \$ <u>0</u> |
|-----|-----|--------------------------------|-------------|-------|------|------|------------|-------|--|-----|------------------|
| | c) | Total Claims | 28 | - | 20 | = | 8 | x | \$ 18.00 | = | \$ <u>144.00</u> |
| | d) | Fee for Multiple Claims | | | | | | | \$280.00 | = | \$ |
| | | | | | | | Total Fil | ing | Fee | | \$ <u>884.00</u> |
| (X) | Ap | plicant(s) qualifies as a Smal | l Entity, r | edu | cing | Fili | ng Fee by | ha ha | lf to | \$_ | 442.00 |
| (X) | Αc | check in the amount of \$ 442 | 2.00 | to c | over | the | filing fee | is | enclosed. | | |
| () | Cha | arge \$ to Deposit A | Account N | Vo. (| 07-2 | 069 | | | | | |
| () | Oth | ner | | | | | | | ······································ | | |
| (V) | The | Commissioner is hereby suf | homizad ta | aha | *** | | additional | faa | a which m | a 1 | a magninad to |

(X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.

Suite 2500 300 S. Wacker Drive Chicago, Illinois 60606 (312) 360-0080

Patrick G. Burns

Registration No. 29,367

 $F:\DATA\WP60\2320\65992\TRMS-PAT.doc$